BEST AVAILABLE COP'

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CIPI 2-001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/ 4 minus 20=		· C			X\$ 9=	-	OR	X\$18=		
INDEPENDENT CLAIMS			~ minus 3 =		·			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT				ŀ	+135=			+270=		
* If	the difference	in column 1 is	less than z	ero, ente	"0" in column 2			TOTAL	DEV	OR	TOTAL		
CLAIMS AS AMENDED - PART II							TOTAL	357	OR	OTHER	THAN		
(Column 1)				(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***	30.50	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI					CLAIM			+135=		OR	+270=		
							L	TOTAL			TOTAL		
		(Column 1)	,	ADDIT. FEE		1011	ADDIT. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM			+135=		OR	+270=		
							L.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	1200	(Colu	mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=	_	OR	X\$18=		
	Independent	*	Minus	***		=	ŀ	X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		CLAIM		 			1			
	If the entry in colu	mn 1 is less than t	the entry in co	olumn 2. writ	e "0" in co	olumn 3.	L	+135=		OR	+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												